CITY OF WOODBURY DEPARTMENT OF ADMNISTRATION CLERK DIVISION 8301 VALLEY CREEK ROAD WOODBURY, MN 55125 651-714-3524

How to apply for a Temporary Liquor License:

Under state statute, temporary liquor licenses may be issued to a club or charitable, religious, or other nonprofit organization in existence for at least three years and the licenses are subject to the terms set by the issuing county or city.

Items to submit to the Woodbury City Clerk for review:

- 1. Temporary Liquor License Application
- 2. Temporary Liquor License applicants are required to provide the City with proof of non-profit status.
- 3. Letter of intent and description of the event
- 4. Fee:
 - Intoxicating Liquor and Wine \$50.00 per day (s) of event: This license must be approved by the Woodbury City Council and Minnesota Department of Public Safety Alcohol and Gambling Enforcement Division
 - 3.2% Malt Liquor \$25.00 per event: This license must be approved by the Woodbury City Council
- 5. Information regarding servers. Please note: Servers responsible for the service of alcohol must attend a brief training session conducted by a public safety staff member.
- 6. Identify one individual that will remain alcohol free and provide name and cell number to the City. This individual will be the contact person during the event.

Questions regarding temporary liquor licensing should be directed to:

Kimberlee K. Blaeser, City Clerk - 651-714-3524



Minnesota Department of Public Safety

ALCOHOL AND GAMBLING ENFORCEMENT DIVISION



444 Cedar Street Suite 133, St. Paul MN 55101-5133 (651) 201-7507 Fax (651) 297-5259 TTY (651) 282-6555 WWW.DPS.STATE.MN.US

APPLICATION AND PERMIT FOR A 1 TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE

TYPE OR PRINT INFORMATION				
NAME OF ORGANIZATION	DATE ORGANIZED	TAX EXEMPT NUMBER		
STREET ADDRESS	CITY	STATE	ZIP CODE	
NAME OF PERSON MAKING APPLICATION	BUSINESS PHONE ()	HON (ME PHONE)	
DATES LIQUOR WILL BE SOLD		TYPE OF ORGANIZATION CLUB CHARITABLE RELIGIOUS OTHER NONPROFIT		
ORGANIZATION OFFICER'S NAME	ADDRESS			
ORGANIZATION OFFICER'S NAME	ADDRESS	ADDRESS		
ORGANIZATION OFFICER'S NAME	ADDRESS	ADDRESS		
Location license will be used. If an outdoor area, descr				
Will the applicant contract for intoxicating liquor service	ce? If so, give the name and address	of the liquor lice	nsee providing the service.	
Will the applicant carry liquor liability insurance? If so	o, please provide the carrier's name a	and amount of co	verage.	
APPLICATION MUST BE APPROVED BY CIT	APPROVAL IY OR COUNTY BEFORE SUI ENFORCEMENT	BMITTING TO	ALCOHOL & GAMBLING	
CITY/COUNTY	DATE APPR	DATE APPROVED		
CITY FEE AMOUNT	LICENSE DA	LICENSE DATES		
DATE FEE PAID				
SIGNATURE CITY CLERK OR COUNTY OFFICIAL	A PPD OVED DIDECTOR	DALCOHOL AND	CAMBI INC ENCODCEMENT	

NOTE: Submit this form to the city or county 30 days prior to event. Forward application signed by city and/or county to the address above. If the application is approved the Alcohol and Gambling Enforcement Division will return this application to be used as the License for the event